

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 1 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 02 / 09 / 2016	

Full Name of Payee <b>RR Donnelly</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016		
Mailing Address P.O. Box 730216			Amount 1374.55		
City Dallas	State TX	Zip Code 75373	Transaction ID : D622767		
Purpose of Expenditure Magazine article, printing and shipping		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016		
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		161607.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <b>RR Donnelly</b>			Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016		
Mailing Address P.O. Box 730216			Amount 68.73		
City Dallas	State TX	Zip Code 75373	Transaction ID : D622768		
Purpose of Expenditure Magazine article, printing and shipping		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016		
Name of Federal Candidate Benjamin S. Carson Sr		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought		161607.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1443.28
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

[Electronically Filed]

Date

MM / DD / YYYY  
02 / 17 / 2016

Signature

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB  
.

Form/Schedule: F24A

Transaction ID :

Nationally disseminated magazine content (all line items dated 2/8/2016) Please note: the two expenses for The Pivot Group (line items dated 2/9/2016) reflect spending in Nevada. Due to data system constraints, the ""state"" section for these two line items could not be updated to ""NV"" on this amendment without inaccurately listing ""NV"" as the state on all line items.

Form/Schedule:

Transaction ID:

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

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NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		<b>FEC IDENTIFICATION NUMBER ▼</b>	
		<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00235853         </div>	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on			
		<div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            02 / 09 / 2016         </div>	

Full Name of Payee <b>RR Donnelly</b>			Date of Public Distribution/Dissemination		
Mailing Address P.O. Box 730216			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            02 / 08 / 2016         </div>		
City Dallas	State TX	Zip Code 75373	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">68.73</div>		
Purpose of Expenditure Magazine article, printing and shipping		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	<b>Transaction ID : D622769</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            02 / 08 / 2016         </div>		
Name of Federal Candidate Rafael Edward Cruz			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">161607.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

Full Name of Payee <b>RR Donnelly</b>			Date of Public Distribution/Dissemination		
Mailing Address P.O. Box 730216			<div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            02 / 08 / 2016         </div>		
City Dallas	State TX	Zip Code 75373	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">68.73</div>		
Purpose of Expenditure Magazine article, printing and shipping		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	<b>Transaction ID : D622770</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           M M / D D / Y Y Y Y Y Y            02 / 08 / 2016         </div>		
Name of Federal Candidate Carly Fiorina			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">161607.00</div>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ► _____		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">137.46</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) <b>TOTAL</b> Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

[Electronically Filed]

Date

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 02 / 17 / 2016

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 4 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 02 / 09 / 2016	

Full Name of Payee <b>RR Donnelly</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address P.O. Box 730216		Amount 68.73	
City Dallas	State TX	Zip Code 75373	Transaction ID : D622771
Purpose of Expenditure Magazine article, printing and shipping		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Marco Rubio		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		161607.00	

Full Name of Payee <b>RR Donnelly</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address P.O. Box 730216		Amount 68.73	
City Dallas	State TX	Zip Code 75373	Transaction ID : D622772
Purpose of Expenditure Magazine article, printing and shipping		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		161607.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	137.46
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 5 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 02 / 09 / 2016	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 1079.25	
City Washington	State DC	Zip Code 20036	Transaction ID : D622773
Purpose of Expenditure Reimbursement for magazine postage (USPS)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		161607.00	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 53.96	
City Washington	State DC	Zip Code 20036	Transaction ID : D622774
Purpose of Expenditure Reimbursement for magazine postage (USPS)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Benjamin S. Carson Sr		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
		161607.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1133.21
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mr. James Rinefierd

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 6 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 02 / 09 / 2016	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 53.96	
City Washington	State DC	Zip Code 20036	Transaction ID : D622775
Purpose of Expenditure Reimbursement for magazine postage (USPS)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Rafael Edward Cruz		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		161607.00	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 53.96	
City Washington	State DC	Zip Code 20036	Transaction ID : D622776
Purpose of Expenditure Reimbursement for magazine postage (USPS)		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Carly Fiorina		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought		161607.00	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	107.92
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

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02 / 17 / 2016

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 7 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 02 / 09 / 2016	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 1640 Rhode Island Ave NW		Amount 53.96	
City Washington	State DC	Zip Code 20036	Transaction ID : D622777
Purpose of Expenditure Reimbursement for magazine postage (USPS)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Marco Rubio		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought 161607.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY	
Mailing Address 1640 Rhode Island Ave NW		Amount 53.96	
City Washington	State DC	Zip Code 20036	Transaction ID : D622778
Purpose of Expenditure Reimbursement for magazine postage (USPS)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:
Calendar Year-To-Date Per Election for Office Sought 161607.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	107.92
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

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Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 8 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 09 / 2016</div> </div>	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 36.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D622779
Purpose of Expenditure Reimbursement for magazine photos (AP)	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016	
Name of Federal Candidate Benjamin S. Carson Sr		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State:	
Calendar Year-To-Date Per Election for Office Sought 161607.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 36.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D622780
Purpose of Expenditure Reimbursement for magazine photos (AP)	Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016	
Name of Federal Candidate Rafael Edward Cruz		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose    Office Sought: <input type="checkbox"/> House    District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate    State:	
Calendar Year-To-Date Per Election for Office Sought 161607.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	72.00
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

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Date

MM / DD / YYYY  
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Signature



**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 9 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 09 / 2016</div> </div>	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 36.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D622781
Purpose of Expenditure Reimbursement for magazine photos (AP)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Carly Fiorina		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 36.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D622782
Purpose of Expenditure Reimbursement for magazine photos (AP)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Marco Rubio		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	72.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mr. James Rinefierd

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
(Schedule E)PAGE 10 OF 11  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 02 / 09 / 2016</div> </div>	

Full Name of Payee <b>Human Rights Campaign</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 1640 Rhode Island Ave NW		Amount 36.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D622783
Purpose of Expenditure Reimbursement for magazine photos (AP)		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Donald J. Trump		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Doyle Printing &amp; Offset</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 08 / 2016	
Mailing Address 5206 46th Ave		Amount 2266.12	
City Hyattsville	State MD	Zip Code 20781	Transaction ID : D622788
Purpose of Expenditure Magazine insert, printing and shipping		Category/Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 08 / 2016
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2302.12
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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Mr. James Rinefierd

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**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
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NAME OF COMMITTEE (In Full) <b>Human Rights Campaign PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00235853	
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on		MM / DD / YYYY 02 / 09 / 2016	

Full Name of Payee <b>The Pivot Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 1720 I St NW		Amount 2549.46	
City Washington	State DC	Zip Code 20006	Transaction ID : D622765
Purpose of Expenditure Mailing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 09 / 2016	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		161607.00	

Full Name of Payee <b>The Pivot Group</b>		Date of Public Distribution/Dissemination MM / DD / YYYY 02 / 09 / 2016	
Mailing Address 1720 I St NW		Amount 22109.91	
City Washington	State DC	Zip Code 20006	Transaction ID : D622766
Purpose of Expenditure Mailing	Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY 02 / 09 / 2016	
Name of Federal Candidate Hillary Rodham Clinton		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
		161607.00	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	24659.37
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	30172.74

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mr. James Rinefierd

[Electronically Filed]

Date

MM / DD / YYYY  
02 / 17 / 2016

Signature